

06/15/01
J1032 U.S. PTO

A/PLANT

Please type a plus sign (+) inside this box → ☒

PTO/SB/19 (4/98)
Approved for use through 09/30/2000. OMB 0651-0032
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PLANT PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))</small>	Attorney Docket No.	
	First Inventor or Application Identifier	Guennadi Eremin
	Title	Prunus Plant 'LC-52'
	Express Mail Label No.	

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

APPLICATION ELEMENTS <small>See MPEP chapters 800 & 1600 concerning plant patent application contents.</small>	ACCOMPANYING APPLICATION PARTS
1. <input checked="" type="checkbox"/> * Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing)	5. <input checked="" type="checkbox"/> Plant Color Coding Sheet
2. <input checked="" type="checkbox"/> Specification [Total Pages <input]<br="" type="text" value="9"/> (2 copies required - 37 C.F.R. § 1.163(b) (preferred arrangement set forth below) - Descriptive title of the invention (with Plant's name) - Cross References to Related Applications - Statement Regarding Fed sponsored R & D Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings - Detailed Botanical Description - Claim (only one (1) permitted MPEP 1605) - Abstract of the Disclosure	6. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 7. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee) 8. <input type="checkbox"/> English Translation Document (if applicable) 9. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 10. <input type="checkbox"/> Preliminary Amendment 11. <input type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 12. <input checked="" type="checkbox"/> Small Entity Statement(s) <input type="checkbox"/> Statement filed in prior application, Status still proper and desired (PTO/SB/09-12) 13. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 14. <input type="checkbox"/> Other: _____
3. <input type="checkbox"/> Color drawing(s) [Total Sheets <input type="text"/> (2 copies required - 37 C.F.R. § 1.165(b))	
4. Oath or Declaration [Total Pages <input]<br="" type="text"/> a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 15 completed) i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).	

* NOTE FOR ITEMS 1 & 12: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).

15. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:
☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: _____
Prior application information: Examiner _____ Group / Art Unit: _____
For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

16. CORRESPONDENCE ADDRESS
☐ Customer Number or Bar Code Label _____ or ☒ Correspondence address below
(Insert Customer No. or Attach bar code label here)

Name	Ms. Shannon K. Reeser				
	Varieties International				
Address	P.O. Box 753				
City	Lafayette	State	Oregon	Zip Code	97127
COUNTRY	USA	Telephone	(503) 538-2131	Fax	

Name (Print/Type)	Registration No. (Attorney/Agent)
Signature	Date

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**FEE TRANSMITTAL
for FY 2001**

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$)**245.00****Complete if Known**

Application Number	
Filing Date	
First Named Inventor	Guennadi Eremin
Examiner Name	
Group Art Unit	
Attorney Docket No.	

METHOD OF PAYMENT

- 1.
- ☐
- The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number	
Deposit Account Name	

☐ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17☐ Applicant claims small entity status. See 37 CFR 1.27

- 2.
- ☒
- Payment Enclosed:**

☒ Check ☐ Credit card ☐ Money Order ☐ Other**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
101	710	201	355	Utility filing fee	
106	320	206	160	Design filing fee	
107	490	207	245	Plant filing fee	245.00
108	710	208	355	Reissue filing fee	
114	150	214	75	Provisional filing fee	

SUBTOTAL (1) (\$)**245.00****2. EXTRA CLAIM FEES**

Total Claims		Extra Claims		Fee from below		Fee Paid	
Independent		-20** =		X		=	
Multiple Dependent		-3** =		X		=	

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
103	18	203	9	Claims in excess of 20
102	80	202	40	Independent claims in excess of 3
104	270	204	135	Multiple dependent claim, if not paid
109	80	209	40	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)**0**

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for ex parte reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	390	216	195	Extension for reply within second month	
117	890	217	445	Extension for reply within third month	
118	1,390	218	695	Extension for reply within fourth month	
128	1,890	228	945	Extension for reply within fifth month	
119	310	219	155	Notice of Appeal	
120	310	220	155	Filing a brief in support of an appeal	
121	270	221	135	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,240	241	620	Petition to revive - unintentional	
142	1,240	242	620	Utility issue fee (or reissue)	
143	440	243	220	Design issue fee	
144	600	244	300	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Processing fee under 37 CFR 1.17(q)	
126	180	126	180	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	710	246	355	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	710	249	355	For each additional invention to be examined (37 CFR § 1.129(b))	
179	710	279	355	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)**0****SUBMITTED BY**

Complete (if applicable)

Name (Print/Type)	Registration No. (Attorney/Agent)	Telephone
Signature		Date

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box → ☐

PTO/SB/20 (8-96)
Approved for use through 9/30/98. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PLANT COLOR CODING SHEET <i>(to be used for new applications only)</i>				Attorney Docket Number	.
				First Named Inventor	Guennadi Eremin
				FOR OFFICIAL USE ONLY	
'LC-52'				Date of Receipt	
				Application Number	
Sheet	1	of	1		

PLEASE LIST THE ITEM TO WHICH COLOR IS A DISTINGUISHING FEATURE, THE COLOR CODE WHICH BEST REPRESENTS THAT PLANT STRUCTURE AND THE COLOR CODE SYSTEM.

ITEM	COLOR
Trunk:	
Trunk Bark Color	178A
Lenticel Color	198B
Branches:	
Branch Color	175A
Lenticel Color	198B
Leaves:	
Leaf Color (adaxial surface)	139B
Leaf Color (abaxial surface)	139C
Petiole Color	149C
Vein Color (adaxial & abaxial surfaces)	141B
Fruit:	
Stem Color	144A
Skin Color	187A
Flesh Color	187C
Seed Color	164B
Flower:	
Bud Color	155C
Flower Color Fully Opened (upper & lower surfaces)	155C
Color of Peduncle	144B
Calyx Color	152C
Reproductive Organs:	
Stamen Color	145C
Anther Color	9A
Color of Pollen	9A
Pistil Color	144C
Style Color	144C
Ovary Color	155C

COLOR CODE SYSTEM: RHS Colour Chart of the Royal Horticultural Society

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



VARIETIES
INTERNATIONAL

Tel. 503.538.2131

800.421.4001

Fax 503.538.7616

P.O. Box 549, Dundee, Oregon 97115

E-mail: TREECONN@aol.com

April 9, 2001

Assistant Commissioner for Patents
Box Patent Application
Washington, DE 20231

Re: Patent Application Packet for Prunus Plant 'LC-52'

Dear Assistant Commissioner:

Enclosed you will find a patent application packet for the above reference plant with the following forms:

- ✓ Plant Patent Application Transmittal
- ✓ Fee Transmittal
- ✓ Plant Patent Application Declaration
- ✓ Declaration - Plant Patent Application
- ✓ Statement Claiming Small Entity Status
- ✓ Plant Color Coding Sheet
- ✓ Two (2) copies of the specifications

I have also enclosed a check in the amount of \$245.00 to cover the basic filing fee. If you have any questions I can be reached at (503) 435-2000 or by e-mail at shannon@meadow-lake.com.

Sincerely,

Shannon K. Reeser
Executive Assistant

Enclosures